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ABSTRACT

The author begins with a broad discussion of the background and historical development of bibliotherapy. Through the study of theories, observations, personal opinions and comments, it is concluded that the field of bibliotherapy is a very subjective one. It is recommended that libraries increase their bibliotherapeutic role. (SG)

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TOWARD A ROLE FOR LIBRARIES IN BIBLIOTHERAPY

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Background

Bibliotherapy can be traced to the ancient libraries of Thebes which bore the following inscription in Greek: "Medicine (or remedy) for the soul." Reading became associated with medicine in the works of Aulus Cornelius Celsus, the Roman encyclopedist of the first century, who urged that critical judgement be stimulated in patients by means of reading and discussing the sayings of the great orators of the times.

Bibliotherapy has existed in America since the 1800's when it actually flourished and was one of the most important methods of psychotherapy second only to outdoor exercise in its curative powers. In the latter part of the eighteenth century, Pinel in France, Chiarugi in Italy, and Tuke in England advocated a more humane treatment of the insane. The proposed new methods were moral treatments which were neither physical nor medical. Instead they consisted of what we would today term as occupational and recreational therapy. Reading became a popular recreation and libraries were established in mental hospitals by the end of the eighteenth century in Europe, and by the middle of the nineteenth century in America.

Dr. Benjamin Rush was one of the first Americans to recommend reading for the sick. In November of 1802, Rush delivered a paper,"On the Construction and Management of Hospitals" in which he stated that a small library should

compose a part of the hospital furniture for the amusement and instruction of its patients. Rush also recommended reading for entertainment purposes and for conveying knowledge. A new job classification of recreational-bibliotherapist was conceived as being the following:

> . . . an intelligent man and woman be employed to attend the different sexes, whose business shall be to direct and share in their amusements and to divert their minds by conversation, reading, and obliging them to read and write upon subjects suggested from time to time by the attending physicians.[1]

Dr. John Minson Galt,II was the first American to write an article on bibliotherapy and to give an overall picture of libraries in America's insane asylums. Galt became Superintendent of the Eastern Lunatic Asylum of Virginia and began dealing with the concept of bibliotherapy in his annual reports and in his book, The Treatment of Insanity. In 1853, he published an essay, "On Reading, Recreation and Amusements for the Insane" in which he stated that reading was beneficial to the insane for these reasons:

1. Reading occupies the mind and frees it from morbid thoughts and delusions.
2. Reading helps to pass the time.
3. Reading imparts instruction.
4. Reading shows kindness to patients and the good feelings that the hospital staff have for the patients.
5. Reading also keeps patients content, occupied and therefore manageable.[2]

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[1]Philip J. Weimerskirch,"Benjamin Rush and John Minson Galt,II: Pioneers of Bibliotherapy in America, Medical Library Association Bulletin, volume 53, October 1965, p. 511.

[2]Ibid., p. 517-518.

Bibliotherapy was quickly associated with censorship as Galt formulated some general rules governing patients' reading, book selection and the management of the library. He suggested that patients should never be given anything to read which might involve their warped ideas or volatile emotions. The library therefore became an intellectual pharmacy stocked with remedies for every kind of emotional disorder.

During World War I, Samuel McChord Crothers was one of the first to use the actual term "bibliotherapy". In 1919, Elizabeth Green, a librarian, and Dr. Sidney Q. Schwab, a professor of clinical neurology, described some present-day concepts of bibliotherapy in an article, "The Therapeutic Use of a Hospital Library".

In the 1920's the concept of bibliotherapy became a word meaning an enthusiasm, an art, and a science in the following respective articles: "The Cheering Stimulus of Poetry in Veteran's Bureau Hospitals" by Annie L. Craigie, "Therapeutic Value of Properly Selected Reading Matter" by Elizabeth R. Creglow, and in articles stressing the need for case histories and records written by such spokesmen as Sir Bruce Bruce-Porter and Dr. G.O. Ireland.

Bibliotherapists blossomed in the 1930's with such people as Dr. Gordon R. Kamman, University of Minnesota, who called for the cooperation of the physician and the librarian and stressed the importance of keeping records of reading. In the late 1930's, Dr. William C. Menninger discussed a

a five-year program in bibliotherapy at the Menninger Clinic, and Alice I. Bryan wrote a paper entitled "Can there be a Science of bibliotherapy?".

In the 1940's, writers began to examine the major premises of bibliotherapy by discussing the qualifications and background of a bibliotherapist, the effectiveness of bibliotherapy, and the importance of scientific methods and record keeping. In 1949, a Ph.D. dissertation, "Bibliotherapy: A Theoretical and Clinical-Experimental Study" by Caroline Shrodes was published analyzing the lack of a scientific framework in bibliotherapy. The following year two master's papers were published: Isabelle H. Rust's "Bibliotherapy in Mental Hospitals and Tuberculosis Sanatoria", and Elizabeth A. Stein's "Bibliotherapy: A Discussion of the Literature and an Annotated Bibliography for the Librarian".

The 1950's produced "Books and Mental Patients" by Melvin C. Oathout. 1955 marked the year of a major historical review of bibliotherapy which was based on a paper presented at the 1955 conference of the ALA Hospital Libraries Division.

In 1960, the Bibliotherapy Clearinghouse became a regular feature in the issues of the AHIL Quarterly under the editorship of William E. Ticknor. AHIL committee on bibliotherapy produced a questionnaire concerning the definition of bibliotherapy in 1961. In October of 1962, Library Trends devoted an entire issue to bibliotherapy.

In 1963, ALA received a grant of $3,197 from the U.S. Public Health Service for a workshop entitled "Bibliotherapy: What it is and can do for mental health". The resulting workshop took place in St. Louis, June 25-27, 1964 and as a result the following items were recommended: an educational program concerning the field of bibliotherapy, additional research in the field, and a system of standard nomenclature in the science of bibliotherapy.

In the past decade there have been major federal and professional supports for bibliotherapy. Support has come through the National Institutes of Health, which under the Medical Library Assistance Act, Public Law 89-291 provides that public funds will become available for all libraries in AHIL membership. Section #3 of this Law provides assistance by awarding special fellowships to physicians and other practitioners in the sciences related to health. These fellowships are specifically given in order to compile existing written material and to create additional material which will utilize information relating to scientific, social and cultural advances in the sciences related to health. Section #4 of Public Law 89-291 provides assistance in conducting research and investigation in the field of medical library science and in the development of new techniques, systems and equipment for processing, storing, retrieving and distributing information in the sciences related to health.

Research and Opinions in Bibliotherapy

From a wealth of widely varying theories, observations, comments and personal opinions one can conclude that bibliotherapy is a highly subjective field which is open to both strong negative as well as positive reactions from psychologists, physicians, nurses, psychiatrists, as well as librarians. M. E. Munroe, "Services in Hospital and Institutional Libraries", suggests that since we as librarians are dealing with maintaining physical, mental and emotional health in society, we therefore become involved in providing specific programs of activity and guidance to those under stress. Bibliotherapy is such a program in which the librarian, by working with a medical or academic staff, has the opportunity for personal observation and service which are the essence of good librarianship.

Bibliotherapy is also viewed as a positive source of therapy for hospitalized individuals. Dr. Hakon Sjögren, "Patients and Books: some personal considerations", suggests bibliotherapy as a means of healing through books. Rose R. Burket, "When Books are Therapy" emphasizes keeping the patient hopeful through a program involving bibliotherapy. She cites the example of an 80 year old woman, former teacher, who tutored a young German nurse in English with the help of the hospital library facilities.

Armando R. Favazza, "Bibliotherapy; a critique of the literature" defines bibliotherapy as a program of selected activity involving reading materials which is planned, conducted and controlled under the guidance of a physician as treatment for psychiatric patients. Bibliotherapy uses, if needed, the assistance of a trained librarian. The concept of bibliotherapy is no panacea, but with proper scientific study may help many patients. The fact is that the vast majority of the literature on bibliotherapy is unscientific, confusing and conjectural. Favazza states that if there is to be a science of bibliotherapy, work on it must pass beyond anecdotes to forming principles and proceeding to scientific experimentation.

Bibliotherapy is analyzed in terms of children and young adults in P. J. Cianciolo's article, "Children's Literature can affect coping behavior" in which the positive effects of children's literature are investigated. Bibliotherapy is conceived as helping an individual through the following:

1. Helping the reader acquire information and knowledge about the psychology and physiology of human behavior.
2. Helping the reader to better 'know thyself'.
3. Bringing about relief from unconscious difficulties.
4. Clarifying difficulties and providing insight into the reader's own behavior.

The author also cites some specific examples of research in the field of bibliotherapy. Kircher (1945) has studied

the effectiveness of trade books as an intrinsic aid in treating the child with a social or emotional problem. Fischer(1965) produced a bibliography of literature useful in the solution of emotional problems of children.

The staff of the Materials Center of the University of Chicago (1947) investigated the question concerning whether or not the reading of certain books and the subsequent identification with the characters could have a deep-seated effect on the child reader. Fifty of the most popular books of fiction were selected to represent current patterns in social experiences, inter-personal relations, and childhood and adolescent problems. Twenty-five titles were written for the later childhood age group and twenty-five were for the early adolescent age group. The following three techniques were used in studying the effects of books on youth: the focused interview, a story projective technique, and a socio-metric technique. The reader was expected to reveal his his identification with or rejection of the characters as a result of each of the three techniques. The directions of the findings were reported in Youth, Communications and Libraries (Brooks, 1959). The developmental values in a book do not produce dynamic changes in the reader. However, they do contribute to these dynamic changes. The vicarious experiences or values in books become effective forces only when they are appropriate to the developmental level of the reader. Children from different socio-economic levels and

cultural groups respond to different values or experiences as does the individual child. Two major implications of this study are that children's literature has a place in changing behavior, but the books should be carefully chosen for content and style. Also, reading books should be accompanied by follow-up activities if a significant amount of behavioral change is to occur.

Richard L. Darling, "Mental Hygiene and Books" considers two different techniques in bibliotherapy. The first technique employs a psychiatrist or another trained person who attempts to solve a child's or an adolescent's emotional problems by vicarious experience through a book. The individual gains insight into his own problems, a first step toward solving it, by recognizing the problem and its solution in literature.

The second technique may be called preventive bibliotherapy. This technique assumes that all children and young adults face certain problems and by developing a sane and stable set of attitudes through literature, the person is prepared to make an easier adjustment when these problems occur in his own life. Bibliotherapy in this sense is mental hygiene without the basic requirement of a present illness.

Melvin C. Oathout, in "Books and Mental Patients" presents three levels of sophistication in thinking about bibliotherapy. The first level or the sentimental level is represented

by an individual who enters a library or mental hospital and exclaims,"Isn't it splendid for patients to have such a nice library!" All books are beneficial to all patients. The second level is an uncritical grouping of all patients into the same category so that only certain types of books are good for all mental patients. The third level distinguishes between both classes of patients and categories of ideas so that certain types of books are beneficial to certain types of mental patients. This third level is actually a scientific concept of bibliotherapy which entails experimentation with types of patients and categories of reading material.

Research in bibliotherapy is not merely a process of comparing the effects of static categories of reading on predefined varieties of mental illness. A nearly unlimited amount of combinations of both mental illness and reading make mechanical methods sterile and routine. Mr. Oathout suggests that the individual interview, group reading and discussion, and observations of behavior patterns by ward personnel and other patients could be employed by the therapist to observe the results of reading.

Trends and Conclusions

Educators, physicians, and librarians are becoming increasingly aware that the library is an institution that serves both the human mind and spirit and therefore can provide a major bulwark against mental illness. Bibliotherapy has been used successfully to counteract personality adjustment disorders, drug addiction, alcoholism, social adjustments, juvenile delinquency, and psychotherapy and as a motivational force in Veterans Administration hospitals.

Bibliotherapy, however, should not be limited to a clinical setting, hospital or institution. It should and has found a place in schools and public libraries as well as in everyday life situations. Bibliotherapy is and should be recognized as pertaining to the entire community as mental health and rehabilitation have become general societal concerns, not concerns for the privileged few.

In 1939, A.I. Bryan asked the question 'Can there be a science of bibliotherapy?'. In the past, papers have mainly considered anecdotal reporting. However, today these are seen less frequently as scientific investigation and studies appear. Richard Favazza (1966, 1967) and Alexander (1967) are two individuals who have documented effects of bibliotherapy with schizophrenic patients.

The future of the science of bibliotherapy is optimistic certainly in relation to activities in psychiatry, medicine

and social work. However, bibliotherapy has not been fully recognized and accepted in librarianship. Bibliotherapy, as a therapeutic technique involving selected reading which can serve as a supplement to psychotherapy, still remains unexplored for the most part in the library profession. If we feel, as Ruth M. Tews does, that libraries as social organizations should reach out and use all the means and tools that will enhance the efforts of library work, then bibliotherapy must become recognized and accepted as a topic in library curricula; as a topic in interpersonal relationships; and as a topic in the analysis of literature for emotional content, psychological significance, and as a form of communication. Library services and curricula must indeed bring about the development and extension of bibliotherapy as a means of giving more personalized attention and maintaining the human dignity for all.

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